FORM AD 4349E GUIDELINES

COST SETTLEMENT FORM

This form is used at year end to establish a cost settlement procedure between each private non-profit adoption agency in the State of California. If the actual cost experienced by the provider is greater than the provisional rate, an amount will be due to the provider. If the actual cost is less, then the difference will be owed to the State.

<u>Line Item 1 - Provider Name</u>: Please enter provider corporate name.

<u>Line Item 2 - Program Name</u>: Please enter the name of the specific PAARP program within your organization.

<u>Line Item 3 - Actual Period</u>: Please enter the dates of the actual fiscal period.

<u>Line Item 4 - Average Actual Cost Per Adoption</u>: List the actual cost experienced by the provider during the current period using data from Form D, Line 17.

<u>Line Item 5 – Final PAARP Reimbursement Rate</u>: List the actual cost experienced by the provider during the current period using data from Form D, Line 17. If that amount is greater than \$10,000, enter the maximum reimbursement rate of \$10,000.

<u>Line Item 6 - Provisional Rate Per Adoption</u>: List the provisional rate which was agreed upon prior to the start of the previous year using data from Form B, Line 17.

<u>Line Item 7 - Cost in Excess of PAARP Rate per Average Adoption</u>: If Line 5 is less than Line 6, subtract Line 5 from Line 6. This is the amount owed to the State per average adoption.

<u>Line Item 8 - Cost in Deficit of PAARP Rate per Average Adoption</u>: If Line 5 is more than Line 6, subtract Line 6 from Line 5. This is the amount owed to the provider per average adoption.

<u>Line Item 9 – Actual Number of Completed Adoptions</u>: List number of completed adoptions using data from Form D, Line 14.

<u>Line Item 10 – Amount Due to State</u>: If actual cost is less than the provisional rate, the amount due to the State should be listed on this line by multiplying Line 7 and Line 9.

<u>Line Item 11 – Amount Due to Provider</u>: If actual cost is greater than the provisional rate, the amount due to the provider should be listed on this line by multiplying Line 8 and Line 9.